

**City of San Bruno – Utility Billing Division
Credit Card Pre-Authorized Payment Form**



I authorize the City of San Bruno to keep my signature on file and to charge my MasterCard or Visa account as indicated below:

☐ One-time charge – specified amount: _____

☐ Recurring Charges – varying amount (required for regular bill pay)
Please note: Customer must phone Utility Billing Office for each payment

Customer Name

Service Address

Utility Account # _____
(if new account, please leave blank)

Cardholder Name

Cardholder Billing Address

| | | |
|-------------|--------------|------------|
| City | State | Zip |
|-------------|--------------|------------|

| | |
|------------------------------|-------------------------------------|
| Credit Card Account # | Expiration Date (month/year) |
|------------------------------|-------------------------------------|

| | |
|-----------------------------|-------------|
| Cardholder Signature | Date |
|-----------------------------|-------------|

Cardholder daytime phone number

Please return completed and signed authorization form to:

Fax: (650) 876-0256

Or by mail:

San Bruno Utility Billing Division

570 Linden Avenue

San Bruno, CA 94066

Phone: (650) 616-7086